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INSTITUTION OF SOCIAL
MEDICINE

10, PARKS ROAD,
OXFORD

EAST SUFFOLK COUNTY EDUCATION
COMMITTEE.



ANNUAL REPORT

OF THE

School Medical Officer

1948

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EAST SUFFOLK COUNTY EDUCATION COMMITTEE.

PUBLIC HEALTH DEPARTMENT
COUNTY HALL,
IPSWICH.

August, 1949,

TO THE CHAIRMAN AND MEMBERS OF THE
EDUCATION COMMITTEE.

MY LORDS, LADIES AND GENTLEMEN,

I beg to submit my annual report upon the work of the School Health Service for 1948.

The year has been notable for the coming into force of the National Health Service Act, 1946, an Act which has had its repercussions on the school child as on other sections of the community.

It will be recalled that the Education Act, 1944 required that a free and comprehensive medical treatment service should be made available by local education authorities to all pupils attending maintained schools and although the full effects of the National Health Service Act were not apparent by the end of this year, an immediate result was that on 5th July the financial arrangements made between the Committee and Hospitals under the Education Act came to an end. Similarly the arrangements the Committee had made with local transport undertakings for the issue of travel vouchers to enable school children to attend hospital were continued, but after the appointed day, responsibility for reimbursement of the expenditure was assumed by the Regional Hospital Board.

As it becomes possible for the provisions of the National Health Service Act to be more widely implemented and the Services visualised more fully developed, it would seem that the medical treatment of school children will become, to a far greater extent than before, the responsibility of the Hospital Boards and the general medical practitioners and that the school health service will be able to concentrate on the bigger issues of the prevention of illness and the promotion of positive health.

The health of the school child as revealed by school medical inspections continues to be satisfactory and whilst the percentage of children whose general condition was classed as "good" fell from 55.07% in 1947, to 45.35% in 1948, I think that this has to be accounted for, not by a deterioration in the well-being of the children, but by the fact that changes in the medical staff brought differing opinions as to the definitions of "good" and "fair". This view appears to be borne out by the fact that the percentage of children of poor general condition remains unchanged.

For the second year in succession no case of diphtheria among children of school age was notified throughout the County. This happy state of affairs must be attributed to the policy of immunisation of pre-school children but it should be emphasised that the present general level of immunity must be maintained and, indeed, raised if we are to continue to keep the school population free from diphtheria.

The ascertainment of handicapped pupils continues to occupy an increasing amount of the time of the professional staff, but the difficulties in obtaining the special educational treatment recommended have not lessened during the year.

As will be seen from the report of the Senior Dental Officer, the position of the school dental service is not altogether satisfactory, due, to a large extent, to the difficulty in obtaining suitably qualified staff in competition with the attractions of private dentistry.

I would like, once more, to express my thanks for the continued help and support extended to me by the Chairman and Members of the School Welfare Sub-Committee and the Chief Education Officer, together with his office and teaching staffs. I would also like to record my appreciation of the way in which my own staff, professional and clerical, have carried out their duties during the year.

I have the honour to be,

Your obedient servant,

H. ROGER,

School Medical Officer.

SCHOOL HEALTH SERVICE

STAFF.

1. School Medical Officer:

H. Roger, M.A., M.B., CH.B., D.P.H.

Deputy School Medical Officer:

S. T. G. Gray, M.B., CH.B., D.P.H., from 8/11/48.

Assistant School Medical Officers:

H. C. G. Pedler, M.R.C.S., L.R.C.P., D.P.H.

W. M. Burns, M.B., B.CH., D.P.H., B.A.O., D.T.M., resigned 30/6/48.

E. A. Parkinson, M.B., CH.B., D.P.H., resigned 30/9/48.

C. H. Imrie, M.B., CH.B., D.P.H.

A. A. Gilmour, M.D., CH.B., D.P.H.

S. A. Maclean, M.B., CH.B., D.P.H., resigned 31/5/48.

P. J. H. Clarke, B.SC., M.B., B.CH., D.P.H., from 14/6/48.

J. L. Patton, M.B., CH.B., C.P.H., D.P.H., from 1/7/48.

I. M. O. Allan, M.A., M.B., CH.B., D.P.H., from 6/4/48.

The arrangement with the Director of Greenwich Hospital whereby since 1933, the School Medical Officer has been Superintendent Medical Officer of the Royal Hospital School, Holbrook, and an Assistant County Medical Officer has undertaken the routine school medical inspection, ceased on 31st March, 1948. Statistics relating to the Royal Hospital School are not, therefore, included in this report.

Psychiatrist. G. S. Clouston, M.D., D.P.M., C.P.H. The services of Dr. Clouston and his staff at the Child Guidance Clinic are shared with West Suffolk and Ipswich and a proportion is devoted to work in the Excepted District of Lowestoft.

Speech Therapist: Miss M. A. Hoyle.

School Dental Officers:

Mr. F. E. Street, L.D.S., Senior Dental Officer.

Mrs. J. M. W. Baikie, L.D.S.

Mrs. G. M. Basford, L.D.S., resigned 22/12/48.

Mr. C. D. Macpherson, L.D.S., from 14/6/48.

Mr. J. R. Toller, L.D.S., M.Sc.D. (Chicago), from 7/6/48.

Mr. A. Crawford Allan, L.D.S., from 1/6/48 to 23/12/48.

County Nursing Officer:

Miss M. Lindsay, resigned 31/10/48.

Miss E. Stephenson, from 13/12/48.

School Nurses: Miss M. M. Pearsons (also acting Orthopaedic Nurse), Miss S. J. Williams, Miss M. N. Hardingham, Miss K. Smith, Miss V. L. A. Jones, Miss M. Scott (part-time), Miss O. L. Swann (part-time), Mrs. V. H. Cuckow, from 1/9/48, Miss K. B. Gillham, from 1/9/48.

Dental Attendants: Mrs. D. M. Willis, Miss D. E. Rudd, Mrs. R. M. Langley, Miss E. E. Cable, Miss I. G. F. Watson, from 4/10/48, Miss P. M. Halter, from 5/7/48 to 19/9/48, Miss J. V. Hurren, from 12/7/48 to 3/12/48.

2. Co-operation with other Public Health Services.—The provisions of the National Health Service Act, 1946, which came into operation on the 5th July, 1948, provide opportunity for a much greater degree of co-operation between the School Health and other Services than has previously been possible. It would appear, therefore, that when the Regional Hospital Board and the Hospital Management Committees have set up their complete organisation, the exchange of useful information will develop and be of benefit to the School Health Service.

PRIMARY, SECONDARY MODERN AND GRAMMAR SCHOOLS.

3. Hygiene and Sanitation in Schools.

There has been no material change in the position regarding hygiene and sanitation in schools since my last Annual Report and, therefore, the remarks I made then on this subject can still generally be considered valid.

4. Medical Inspection in Schools.—The area of the administrative County for school purposes, excluding the Borough of Lowestoft, is 544,445 acres, with a population of 163,371 (1931 census), 211 schools in the County are under the control of the Education Committee (195 Primary, 9 Secondary Modern and 7 Secondary Grammar).

The number of children on the school register at the end of the December term was 20,704.

East Suffolk			
1946	...	...	17,165
1947	...	...	19,597 (including 1,665 at Secondary Grammar Schools).
1948	...	...	20,704 (including 1,685 at Secondary Grammar Schools).

(a) *Routine Medical Inspection.*—The following routine examinations were made during the year:—

	1948.	1947.	1946.
Entrants	2,784	2,514	2,179
Second Age Group ...	1,948	1,863	1,787
Third Age Group ...	1,464	816	1,272

(b) *Other Inspections.*

Special Examinations and	
Re-examinations	3,229*
Total ...	9,425

* Special examinations, 99.

The total number of individual children inspected was ...	9,372
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5. Findings of Medical Inspection.

(a)

	Number of Children examined.	GENERAL CONDITION.					
		Good.		Fair.		Poor.	
		No.	Per-centage.	No.	Per-centage.	No.	Per-centage.
1947	5193	2860	55.07	2162	41.63	171	3.29
1948	6196	2810	45.35	3155	50.92	231	3.72

(b) *Uncleanliness.*

Vermin Tables.

	No. of Visits to Schools by School Nurses.	No. of homes visited.	Number of Examinations by School Nurses.			Number of Children examined and found verminous.					
						New Cases, for first time.			Individual Repeat Cases.		
			Boys	Girls	Total	Boys	Girls	Total	Boys	Girls	Total
1943	1046	192	33092	31276	64368	106	292	398	23	125	148
1944	1006	191	31665	32422	64087	130	383	513	27	130	157
1945	749	70	24771	23819	48590	162	442	604	41	131	172
1946	601	157	16947	16524	33471	311	779	1090	140	585	725
1947	876	290	22032	22470	44502	190	497	687	171	586	757
1948	830	301	22909	23198	46107	123	314	437	61	193	254

The number of heads found to be verminous for each 1,000 heads examined was:—

1943	...	...	9.5
1944	...	...	14.7
1945	...	...	15.97
1946	...	...	32.5
1947	...	...	15.43
1948	...	...	9.48

(c) *Ringworm of the Head.*—No cases of ringworm of the head were diagnosed or treated through the School Health Service during 1948.

(d) *Visual Defects and External Eye Diseases.*

Year.	Defective Vision.	
	Referred for Treatment.	Observation Cases.
1947	112	465
1948	159	608

Year.	External Eye Disease.	
	Referred for Treatment.	Observation Cases.
1947	3	14
1948	1	21

(e) *Nose and Throat Defects.*—The following figures show the cases of tonsils and adenoids reported by the School Medical Officers during the past year.

	<i>Referred for Treatment.</i>	<i>Observation Cases.</i>
1948	136	316

6. **Following Up.**

1158 visits were paid by the School Nurses.

7. **Medical Treatment.**

(a) *Minor Ailments and Diseases of the Skin.*—There are no Minor Ailment Clinics in the County, and children suffering from these conditions were referred to their private Medical Practitioner when treatment was required.

(b) *Visual Defects and External Eye Diseases:—*

	1948.	1947.
Number of cases refracted	277	328
Number of children for whom spectacles were prescribed	229	240
Number of children who obtained spectacles	185	279

(c) *Nose and Throat Defects.**Tonsils and Adenoids.*

	Referred for Treatment.	Observation Cases.	Treated through Education Committee.	Treated on own responsibility.	Total Number Treated.	School Roll.	Percentage.
1947	92	296	201	31	232	19597	1.18
1948	328	316	169	25	194	20704	0.93

Of the total of 328 cases referred for treatment under the arrangements made by the Education Authority, 136 were found at medical inspections and were referred by School Medical Officers, the remaining 192 by private medical practitioners.

(d) *Dental Inspection and Treatment.*

The Senior Dental Officer, Mr. F. E. Street, reports as follows:—

“The year 1948 has been one of high hopes and bitter disappointments for the School Dental Service. In April the first Mobile (trailer) unit came into service and has proved immensely useful. It is particularly appreciated by Headmasters of overcrowded schools who find interruption of school routine reduced to a negligible minimum. From the operator’s point of view the permanent surgery type of equipment and convenient lay-out is a great advantage over the use of portable equipment in class rooms. Certain difficulty has been experienced in finding the most economical way of moving the unit but a final solution of this difficulty is now in sight

During the month of June three new Dental Surgeons were appointed so that at the close of the summer term there was, for the first time since the inception of the service, sufficient staff to carry out the work. This state of affairs was unfortunately short lived, and in common with other Authorities throughout the country, East Suffolk began to lose Dental Officers soon after the commencement of the working of the National Health Service Act. By the end of the year three had left restoring, except for a difference of distribution, the status quo.

Of the new appointments Mr. C. D. Macpherson, L.D.S., and Mr. J. R. Toller, L.D.S., M.Sc.D., remained with us and have already gone far towards establishing a high reputation with patients, teachers and parents. Mr. Toller’s previous wide experience as an orthodontist has already been of great value and will be even more so when the advent of permanent surgeries provides a more practical field for his skill.

At the time of writing it can be stated with reasonable certainty that one such permanent surgery (at Leiston) will be opened in 1949, and that there is hope of two more (Stowmarket and Ipswich).

It has been possible this year to inspect a number of children more closely approaching the total school population (actually 93.5%) and all those inspected have been offered treatment. The acceptance rate has averaged 72% throughout the year, and it is interesting to note that this represents only a slight falling off of 4% from the previous year in spite of numerous staff changes and also the fact that all are now entitled to private treatment under the National Health Service Act.

The steady increase in conservative work started since the war had continued mainly in the restoration of permanent teeth but to some extent also in the temporary dentition where most of the “other operations” are conservations by means other than filling.

It must be recorded however, that there has also been an increase in the number of permanent teeth extracted and that this loss of permanent teeth, so foreign to the avowed object of the service, is inevitable so long as the gap between successive treatments remains at a year or even more.

It will be seen that in spite of considerable difficulties much useful work has been done in this, as in other years, in an area where the services of private practitioners are not always readily available. Hence it is to be sincerely hoped that the anomolous position created by the drift of dental surgeons to the Private Practitioner service will not result, as has been pessimistically forecast in some quarters, in the loss of this service to the children of this county and the country as a whole.”

(e) *Orthopaedic and Postural Defects.*

ORTHOPAEDIC TREATMENT.

	1948.	1947.	1946.
No. of cases on Register 31st December	150	148	138
No. of home visits by Orthopaedic Nurse	166	209	155
No. of visits to schools by " "	—	—	—
No. of treatments by " "	182	271	195
No. of attendances at Clinics ...	234	201	219
Hospital Treatment :—	1948.	1947.	1946.
No. of in-patients ...	12	12	12
No. of out-patients visits ...	356	326	253
Individual children as out-patients	138	109	105
Appliances provided (to 5th July, 1948)	43	76	70

(f) *Child Guidance.*

The Psychiatrist, Dr. G. S. Clouston, has furnished the following details:—

"60 new cases were referred during the year, and 54 cases were carried forward from 1947. Three cases from other areas moved to East Suffolk during the year, making a total of 117 cases dealt with.

11 children were referred for nervous disorders, 5 for habit disorders, 33 for behaviour difficulties, 9 for educational and vocational difficulties and 2 for special diagnostic interviews. The age and sex distribution of the new cases is shown below:—

Age	— 5	5	6	7	8	9	10	11	12	13	14	15	16	Total.
Boys	4	2	1	3	1	6	3	5	5	5	3	2	2	42
Girls	—	—	2	1	3	2	—	1	—	3	6	—	—	18
	4	2	3	4	4	8	3	6	5	8	9	2	2	60

37 of the children referred were in attendance at Primary Schools, 12 at County Modern Schools, 3 at Grammar Schools, and 4 at Independent Schools. 3 were pre-school children and one child had left school.

The Clinic Psychologists tested 48 children during the year, and the intelligence range was as follows:—

I.Q.	Under 50	50-69	70-89	90-109	110-129	130 & over
No. of cases ...	—	8	20	10	8	2

Position at 31/12/48.

Still under treatment	...	...	...	31
Closed ...	...	...	...	61
Supervision	...	...	...	9
Waiting List	...	...	...	9
Investigation Incomplete	...	...	...	7
				<u>117</u>

Of the 31 cases still under treatment at the end of the year, 25 had shown improvement. East Suffolk children had 741 Clinic Interviews during the year, and school visits were paid regarding 92 children. In 79% of the cases seen during the year, improvement and/or environmental adjustment has been effected."

(g). *Speech Therapy.*

The Committee's Speech Therapist, Miss M. A. Hoyle, reports as follows:—

"The treatment of children requiring Speech Therapy has been greatly facilitated during 1948 by the opening of Speech Clinics in premises in Beccles and Bungay which are held once a week and once a fortnight respectively.

It is still impossible to diminish appreciably the number of children awaiting treatment since sufficient time is not available to visit the remote areas in which so many of them live. The answer to this problem would be the provision of more centres at which children could attend for regular treatment but this will only be possible when the services of another full-time Speech Therapist are available.

In general the results of treatment have been gratifying, especially in those cases where it has been possible to obtain full parental co-operation. It should be emphasised that although children may show improvement while actually undergoing treatment the work is inevitably wasted unless there is constant practice at home.

The East Suffolk and Ipswich and Norfolk and Norwich Hospitals have referred several pre school age children and some have also been referred from Maternity and School Welfare Clinics in the County. Those referred from the Hospitals have mostly been children requiring Speech Training for cleft palate repair and are included in the 15 cases of this type whose speech has improved and become less nasal after treatment.

It should be emphasised that treatment sessions cannot be too frequent for partially deaf cases, of which there are 4 at present, during the period while they are awaiting admission to Special Schools if any real progress is to be made. This is also true of the 6 children suffering from some degree of cerebral palsy who are being helped to a certain extent by treatment. There are 31 cases receiving treatment who are in varying degrees educationally subnormal and it is doubtful whether any improvement can be affected in this type of case.

During the year it has been possible to make 70 visits to homes to discuss problems of treatment with parents and give advice regarding the way in which the child can best be helped in its home life to derive full benefit from the Speech Training received."

8. Infectious and Contagious Diseases.

The incidence of infectious disease among school children remained low, apart from a moderate epidemic of measles, and a minor outbreak of mumps.

For the second year in succession no case of diphtheria among the school population was reported, and it is also gratifying to note the fall in the number of cases of scabies was continued.

			<i>No. of Cases.</i>	<i>Attack Rate per 1,000.</i>
Chicken-pox	...	...	288	13.91
Diphtheria	...	...	—	—
Influenza, colds	...	...	62	2.99
Measles	...	...	1177	56.85
Mumps	...	...	222	10.72
Scarlet Fever	...	...	55	2.66
Whooping Cough	...	...	218	10.53
German Measles	...	...	11	0.53
Impetigo	...	...	62	2.99
Ringworm (skin)	...	...	2	0.10
Scabies	...	...	4	0.19
Jaundice	...	...	11	0.53

Diphtheria.—The number of school children immunised during 1948 was 299 as compared with 719 in 1947. In addition, 415 children received “booster” doses.

School Closures.—No closures took place on medical grounds.

9. Physical Training.

The Committee's Chief Organiser of Physical Education, Mr. H. Stott, reports as follows:—

“During the latter part of 1947 there were 85 cases referred for remedial exercises and several of these were still under observation during 1948. 109 new cases were reported in 1948 and these are summarised inclusively under the following headings:—

Flat feet	...	32	Slack Posture	...	29
Kyphosis	...	15	Knock Knees	...	6
Round Shoulders	...	23	Lordosis	...	3
Scoliosis	...	3	Cobblers Chest	...	2
Winged Scapulae	...	6			

All children reported to be in need of remedial exercises were visited and action taken in accordance with the results of the investigation carried out. In addition to an endeavour to trace and cure the cause of the defects suitable remedial exercises were prescribed and the case brought to the attention of the Head Master or Mistress, the teacher normally in charge of the child as well as to the child and its parents.

The supervised execution of exercises is only possible during the occasional visits which an organiser can make to isolated schools. The children are encouraged to perform the exercises on their own with the assistance of both teacher and parents. Although such an arrangement cannot be considered ideal it has been apparent from periodic reports that children, in the majority of cases, have shown a marked improvement during the year.

The removal of the cause, as always, presented a much greater problem. Home conditions and ill-health to which a large number of cases were ascribed are outside the scope of the organisers. The co-operation of the Welfare Officers in this connection was most valuable.

Undoubtedly, the general physical education of the school, including physical training, games, athletics, swimming and dancing has contributed immeasurably to the correction and prevention of orthopaedic cases in the Schools.”

10. School Canteens.—

The following Table gives an indication of the growth of the School Meals Service during the last seven years:—

YEAR.	Meals supplied.			Total.	Av. No. of Meals supplied each day.		% of Children having meals at Schools with Canteens.
	East Suffolk children.	Evacuees.	Staff.		Children.	Staff.	
1942/3	1,159,497	53,204	—	1,167,735	7,448	—	59.2
1943/4	1,813,065	52,272	—	1,865,337	10,131	—	65.5
1944/5	2,096,878	157,652	—	2,254,530	11,444	—	62.4
1945/6	2,289,586	36,545	—	2,326,131	11,859	—	66.4
1946/7	2,378,793	—	—	2,378,793	12,678	—	68.4
1947/8	2,623,348	—	216,957	2,840,305	14,412	1,177	70.77
1948/9	2,625,238	—	228,726	2,853,964	13,775	1,197	66.96

11. Provision of Milk for School Children.

The County Sanitary Officer, Mr. A. E. Chapman, reports as follows:—

“This report is mainly statistical as the figures give an almost adequate picture of the scheme. The corresponding figures for the previous year are shown in brackets beside those for the year 1948. The results of efforts made to improve the supply will be noticed as there is an increase in the consumption of heat treated milk at the expense of undesignated. The consumption of Tuberculin Tested milk remains about the same.

It is pleasing to be able to report that 96.5 per cent of the milk supplied to schools under this scheme is now either Heat Treated or Tuberculin Tested and only 3.5 per cent is other milk.

Of a total daily delivery of over 15,000 third pints, 14,500 are delivered in bottles and of 208 schools receiving milk, 161 are supplied with straws.

1. *The Total Milk Consumption under the scheme and the percentage rates are as follows:—*

TABLE I.

No. of Schools participating (excluding Lowestoft)	...	...	...	209	(211)
No. of children on roll	...	...	...	20,704	(19,597)
No. of children taking milk	...	...	...	15,247	(14,755)
				74%	(75%)

Burgh Castle and Belton Schools have not received a supply under the Scheme since September, 1948.

TABLE II.

Schools in which less than 60 per cent of children take milk.

<i>School.</i>	<i>%age of children taking milk.</i>		<i>School.</i>	<i>%age of children taking milk.</i>	
Hollesley C.	...	33 (39)	Laxfield Mixed V.	48	(60+)
Leiston Sec. Gram.	33	(36)	Bramford Sec.		
Holbrook Area Snr.	35	(45)	Mod.	...	49 (60+)
Stowmarket Sec.			Beccles Sec. Gram.	51	(38)
Gram.	...	35 (46)	Eye Sec. Mod.	...	52 (60+)
Stradbroke V.	...	35 (46)	Stonham Parva C.	52	(57)
Eye Sec. Gram.	...	36 (33)	Bacton	...	54 (50)
Bungay Sec. Gram.	40	(46)	Bungay Sec. Mod.	58	(60+)
Rumburgh C.	...	40 (54)	Framlingham Mills		
Framlingham Sec.			Gram.	...	58 (43)
Mod.	...	45 (45)	Felixstowe Sec.		
Fressingfield V.	...	45 (60+)	Mod.	...	59 (44)

2. Grades of Milk Supplied.

TABLE III.

<i>Grade of milk.</i>	<i>No. of schools receiving.</i>	<i>%age of all schools</i>	<i>1/3rd pints daily.</i>	<i>%age of total supply.</i>
Heat Treated	157 (144)	75 (68)	12,107 (11,270)	79.4 (76)
Tuberculin Tested	37 (38)	17.8 (18)	2,607 (2,668)	17.1 (18)
Other	15 (29)	7.2 (14)	533 (817)	3.5 (6)

3. Method of delivery, i.e. bottles and straws.

TABLE IV.

<i>Heat Treated.</i>	<i>1/3rd pints daily.</i>	<i>No. of Schools</i>
(a) Bottled at place of treatment ...	9,101 (8,757)	104 (102)
(b) Bottled by retailer who received milk in bulk ...	2,850 (1,799)	49 (33)
(c) Delivered to Schools in bulk ...	156 (714)	4 (9)
<i>Tuberculin Tested.</i>		
(a) Bottled at place of production ...	828 (466)	18 (8)
(b) Bottled by retailer who received milk in bulk ...	1,671 (1,105)	15 (17)
(c) Delivered to schools in bulk ...	108 (1,097)	4 (13)
<i>Other.</i>		
(a) Bottled at place of production by Producer/Retailer ...	143 (199)	5 (9)
(b) Delivered to Schools in bulk ...	390 (618)	10 (20)
<i>All Grades.</i>		
<i>Bottles.</i>		
No. of 1/3rd pints delivered daily ...	15,247 (14,755)	
No. in bottles ...	14,593 (12,386)	
<i>Straws.</i>		
No. of schools receiving milk ...	209 (211)	
No. of schools receiving straws ...	161 (133)	

4. Supervision of Supplies

(a) General.

During the year approval was either withdrawn or withheld from 7 suppliers affecting 6 schools and the supply of 117 1/3rd pints daily. In each case the supplier was unable to provide a graded milk and such was available from another approved supplier. Approval was given to one new supplier of Heat Treated milk.

Visits were made to dairies to follow up bad samples in order to improve methods of handling and to encourage the provision of bottled supplies.

(b) *Bacteriological.*

Routine samples were taken for bacteriological examination. There are statutory standards for Heat Treated and Tuberculin Tested milk, but none for other milk; an Accredited standard for this milk has been adopted. Samples were taken at the schools at the time of delivery and were kept on ice from 10.30 a.m. until examination.

TABLE V.

Collection and examination of samples.

<i>Type of Milk.</i>		<i>No. of Samples taken.</i>		<i>Samples failing tests.</i>			
				<i>No.</i>		<i>%age.</i>	
Heat Treated	62 (79)	*17	(7)	27	(9)
Tuberculin Tested	26 (26)	5	(4)	19	(15)
Other	29 (58)	8	(14)	27	(24)

*a further 22 samples showed the presence of coliform bacilli.

(c) *Chemical.*

One retailer who supplied school milk, but who has ceased to do so was convicted for selling milk to which water had been added and which was also deficient in fat.

A retailer ceased to supply two schools following a prosecution for using, illegally, a special designation in relation to milk."

12. Co-operation.—Head Teachers and School Welfare Officers have co-operated fully with the School Health Service and this has ensured the smooth working of arrangements for medical inspection and has been of great assistance in dealing with difficult children.

13. Handicapped Pupils.—The Handicapped Pupils and School Health Service Regulations, 1945, detail eleven categories of defects which require special educational treatment, and the following statistics indicate the progress that has been made in ascertaining and dealing with children who come within the scope of the Regulations.

Educationally Subnormal.—The following table shows the number of educationally subnormal children at present ascertained in the County, 6 of whom are at present in residential Special Schools.

Year	No. of Educationally Subnormal Children on Register at end of year. (Up to 16 yrs.)	No. of Children mentally tested during year	Classified as—				
			Requiring treatment in a Special School		Requiring special class at an ordinary School	Retarded only, not requiring any Special Education	Notified to Local Authority as being ineducable.
			Res.	Day			
1947	185	158	11	21	20	82	24
1948	232	176	18	15	28	101	14

Other Defects—

				<i>Total. ascertained.</i>	<i>At Special School.</i>
Blind Pupils	...	...	...	5	5
Partially Blind Pupils	...	...	...	7	5
Deaf Pupils	...	...	...	9	7
Partially Deaf Pupils	...	...	...	3	1
Delicate Pupils	...	...	...	7	3
Diabetic Pupils	...	...	...	2	—
Epileptic Pupils	...	...	...	5	3
Maladjusted Pupils	...	...	...	2	—
Physically Handicapped Pupils	...	...	...	14	4
Pupils suffering from Speech Defect	...	...	...	2	1
Multiple Defects.					
Educationally Subnormal and Diabetic				1	—
Educationally Subnormal and Physically Handicapped	...	...	...	2	—
Physically Handicapped and Speech Defect	...	...	...	1	1

14. Full Time Courses of Higher Education for Blind, Deaf, Defective and Epileptic Children.

The Committee have made awards in the undermentioned cases :—

Blind Students	...	...	...	1
Crippled Students	...	...	...	1

The following was the position at the end of the year:—

Blind Awards :—

Students in training.	...	...	...	3
Students awaiting training.	...	...	...	1

Cripple Awards :—

Students in training.	...	...	...	1
Students awaiting training.	...	...	...	Nil

Deaf Awards :—

Students in training.	...	...	...	Nil
Students awaiting training.	...	...	...	Nil

15. Nursery Schools. None.

**EAST SUFFOLK COUNTY EDUCATION COMMITTEE
MEDICAL INSPECTION RETURN, 1948.**

TABLE I.

MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED PRIMARY AND
SECONDARY SCHOOLS.

A.—PERIODIC MEDICAL INSPECTIONS

Number of Inspections in the prescribed Groups

Entrants	2,784
Second Age Group	1,948
Third Age Group	1,464
Total ...	6,196

Number of other Periodic Inspections	—
Grand Total ...	6,196

B.—OTHER INSPECTIONS

Number of Special Inspections	99
Number of Re-Inspections	3,130
Total ...	3,229

C.—PUPILS FOUND TO REQUIRE TREATMENT.

Number of Individual Pupils found at Periodic Medical Inspection to require
Treatment (excluding Dental Diseases and Infestation with Vermin).

GROUP. (1)	For defective vision (exclud- ing squint). (2)	For any of the other conditions recorded in Table II.A. (3)	Total individual pupils. (4)
Entrants	47	85	119
Second Age Group	57	95	133
Third Age Group	43	96	117
Total (prescribed groups)	147	276	369
Other Periodic Inspec- tions	—	—	—
GRAND TOTAL ...	147	276	369

TABLE II.

A.—RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION
IN THE YEAR ENDED 31st DECEMBER, 1948.

NOTE:—All defects noted at medical inspection as requiring treatment are included in this return, *whether or not this treatment was begun before the date of the inspection.*

Defect Code No.	Defect or Disease.	PERIODIC INSPECTIONS.		SPECIAL INSPECTIONS.	
		No. of Defects.		No. of Defects.	
		Requiring treatment.	Requiring to be kept under ob- servation, but not re- quiring treatment.	Requiring treatment.	Requiring to be kept under ob- servation, but not re- quiring treatment.
	(1)	(2)	(3)	(4)	(5)
4	Skin	9	23	—	1
5	Eyes—				
	(a) Vision	147	570	7	14
	(b) Squint	5	24	—	—
	(c) Other	1	21	—	—
6	Ears—				
	(a) Hearing	3	22	—	5
	(b) Otitis Media ...	8	36	1	—
	(c) Other	1	9	1	1
7	Nose and Throat ...	74	314	6	2
8	Speech	18	25	—	2
9	Cervical glands ...	1	48	—	3
10	Heart & Circulation ...	—	50	—	1
11	Lungs	7	62	—	—
12	Developmental—				
	(a) Hernia	5	24	—	—
	(b) Other	7	21	—	—
13	Orthopaedic—				
	(a) Posture	37	22	2	—
	(b) Flat Foot	28	49	1	—
	(c) Other	14	83	—	3
14	Nervous System—				
	(a) Epilepsy	—	5	—	—
	(b) Other	—	12	—	—
15	Psychological—				
	(a) Development ...	45	115	—	2
	(b) Stability	2	11	—	—
16	Other	11	91	—	8

B.—CLASSIFICATION OF THE GENERAL CONDITION OF PUPILS INSPECTED DURING THE YEAR IN THE AGE GROUPS

Age Groups.	No. of Pupils Inspected.	A. (Good).		B. (Fair).		C. (Poor).	
		No.	% of col. 2.	No.	% of col. 2.	No.	% of col. 2.
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
Entrants	2,784	1,309	47.01	1,353	48.59	122	4.38
Second Age Group	1,948	784	40.24	1,098	56.31	66	3.38
Third Age Group ...	1,464	717	48.97	704	48.08	43	2.93
Other Periodic Inspections ...	—	—	—	—	—	—	—
Total	6,196	2,810	45.35	3,155	50.91	231	3.72

TABLE III.

TREATMENT TABLES.

Notes.

(a) The Tables deal with all defects during the year, however they were brought to the Authority's notice, *i.e.* whether by periodic inspection, special inspection, or otherwise, during the year in question or previously.

(b) Owing to the difficulty of distinguishing between cases treated under the Authority's schemes and those treated otherwise, the treatment tables (excluding dental) include all cases known to the Authority to have received treatment, whether at the Authority's clinics or elsewhere.

GROUP I.—MINOR AILMENTS (EXCLUDING UNCLEANLINESS, FOR WHICH SEE TABLE V).

(a)	<i>Number of Defects treated, or under treatment during the year.</i>					
SKIN—						
Ringworm—Scalp—						
(i) X-Ray treatment	—
(ii) Other treatment	—
Ringworm—Body	—
Scabies	2
Impetigo	—
Other skin diseases	6
Eye Disease	2
(External and other, but excluding errors of refraction, squint and cases admitted to hospital).						
Ear Defects	12
Miscellaneous	—
(e.g. minor injuries, bruises, sores, chilblains, etc.)						
Total						22
(b) Total number of attendances at Authority's minor ailments clinics	—

GROUP II.—DEFECTIVE VISION AND SQUINT (excluding Eye
Disease treated as Minor Ailments—Group I.)

						<i>No. of defects dealt with.</i>
ERRORS OF REFRACTION (including squint).	...	...	...	...	...	277
Other defect or disease of the eyes (excluding those recorded in Group I).	...	...	...	...	...	—
Total						277
No. of Pupils for whom spectacles were						
(a) Prescribed				...	...	229
(b) Obtained				...	...	185

GROUP III.—TREATMENT OF DEFECTS OF NOSE AND THROAT

						<i>Total number treated.</i>
Received operative treatment:						
(a) for adenoids and chronic tonsillitis	...	...	...	...	...	169
(b) for other nose and throat conditions...	...	...	...	...	...	—
Received other forms of treatment	...	...	...	...	...	—
Total						169

GROUP IV.—ORTHOPAEDIC AND POSTURAL DEFECTS.

(a) No. treated as in-patients in hospitals or hospital schools	15
(b) No. treated otherwise <i>e.g.</i> in clinics or outpatient depart- ments	138

GROUP V.—CHILD GUIDANCE TREATMENT AND SPEECH
THERAPY.

No. of pupils treated (a) under Child Guidance arrangements	90
(b) under Speech Therapy arrangements	266

TABLE IV.**DENTAL INSPECTION AND TREATMENT.**

(1) Number of pupils inspected by the Authority's Dental Officers—						
(a)	Periodic age groups	...	...	...	...	18,770
(b)	Specials	...	...	...	...	45
(c)	TOTAL (Periodic and Specials)				...	18,815
<hr/>						
(2)	Number found to require treatment				...	12,044
(3)	Number actually treated				...	10,087
(4)	Attendance made by pupils for treatment				...	12,902
(5)	Half-days devoted to:		(a) Inspection...	...	...	164
			(b) Treatment...	...	...	1,458
			Total (a) and (b)		...	1,622
<hr/>						
(6)	Fillings:	Permanent Teeth	...	...	...	5,071
		Temporary Teeth	...	...	...	871
		Total	...	...	...	5,942
<hr/>						
(7)	Extractions:	Permanent Teeth	...	...	...	890
		Temporary Teeth	...	...	...	8,897
		Total	...	...	...	9,787
<hr/>						
(8)	Administration of general anaesthetics for extraction				...	43
(9)	Other Operations:	(a) Permanent Teeth	...	...	...	1,677
		(b) Temporary Teeth	...	...	...	2,018
		Total (a) and (b)		...	...	3,695

TABLE V.**INFESTATION WITH VERMIN.**

(i)	Total number of examinations in the schools by the school nurses or other authorized persons	...	...	...	46,107
(ii)	Total number of <i>individual</i> pupils found to be infested	...	...	...	437
(iii)	Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), Education Act, 1944)	...	...	...	—
(iv)	Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), Education Act, 1944)	...	...	...	—

